



Attachment B

State Level Planning Considerations

Public Health and Medical Special Events Planning Guide and Tool Kit

**Florida Department of Health (FDOH)
Bureau of Preparedness and Response (EPR)**

Version 1.3
December 4, 2012

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I. Introduction

This State Level Planning Considerations document is an attachment to the Public Health and Medical Special Events Planning Guide which provides general background information and assumptions related to special events planning. It is recommended that you first read the general information found in the base document.

This document was created to assist state level planners tasked with supporting local planners in preparing for and responding to special events. This document emphasizes planning for a National Security Special Event (NSSE) but the considerations are scalable and can be used to plan for any special event.

Your job as the state planner is to support the local jurisdiction. The level and type of support you will need to provide will be driven by the needs of the locals but will more than likely consist mostly of contingency planning and resource support. It is recommended that you also read Attachment A: Local Planning Considerations to help achieve an understanding of the wide range of challenges the local planners are charged with addressing.

This document contains references to various tools and resources that may be of use to you in your planning. Additional resources are listed in the base document. These resources are available to Florida Department of Health employees and are stored at the following location: <Z:\ESF8 EVENTS\2012 Events\RNC\Special Events Planning Guide>

II. Recommended Sequence of Actions

- A. Establish communications with local, state and federal partners.
- B. Establish an Incident Management Team for planning.
- C. Determine the extent of support/resources that are needed.
- D. Develop a budget and identify funding sources.
- E. Conduct an incident hazard vulnerability analysis.
- F. Review existing plans and develop contingency plans.
- G. Train and exercise assigned staff.
- H. Support local operations during the special event.
- I. Complete an after action review.

III. Planning Considerations

A. Coordination with local, state and federal partners

Communication is a challenge for state planners when preparing for NSSE's because of the information security requirements and the direct federal to local coordination. If you as the state planner do not establish effective communications with your local and federal partners, you may be left out of the loop.

NSSE's are federal events taking place in a local venue and federal government agencies work directly with local government agencies to plan for these events. State planners should stay engaged with both local and federal partners in planning for the events and be aware of the plans and resources

that are in play as all will need to be prepared to switch to a consequence management posture if an incident occurs during the event.

Although many of the practices common in planning for NSSE's are contrary to standard planning practices, local and state partners should continue to utilize standard emergency management practices that have produced effective results for previous large scale events and incidents. Local and state partners need to succeed in spite of the strict communication systems. This may require utilizing out of the box approaches to ensure community partners are effectively engaged in the response preparations.

- Establish a project manager for all large scale events that will require extensive pre-planning with local, state and federal partners. This project manager should engage in local planning by attending meetings and planning sessions. Having a single point of contact for local planners allows for better coordination and delivery of services.
- Conduct joint (local, state, federal) planning as much as possible. Local and state planners should meet as early as possible to discuss the identified capabilities and gaps and potential missions to support the gaps. Planners should agree on the intended use of state-owned resources. Early approval of the specific concepts will minimize disruption of the planning process and ensure mission needs are met.
- For parallel events, such as political conventions, schedule periodic coordination calls with other planners in other states to share information and trouble shoot challenges. *Note: Although attempts should be made to collaborate on planning, restrictions on information sharing may prohibit planners from sharing information.*
- Identify and create a timeline of activities to include planning meetings, training and exercises. In many cases, training and exercises are held just prior to the event.

B. Pre-Event Planning: Establishment and operations of an Incident Management Team (IMT)

A standard incident management structure for public health and medical has been established in the State ESF8 Standard Operating Procedure (SOP) includes 39 pre-identified functions to serve in incident management roles including the Emergency Coordination Officer (the state-level equivalent to public health/medical incident commander) section chiefs, unit leaders, logisticians, IT staff, planners, and public information. FDOH personnel have been identified to fill each of these roles, three-deep. In addition, subject matter experts have been identified to serve as technical specialists. This established incident management team (IMT) structure should be used when planning for special events.

All state-level support activities related to the event should be coordinated through the established IMT. This ensures that the county health departments are receiving coordinated requests and information through one single point of contact (the IMT) and not uncoordinated requests from multiple divisions and bureaus. The ECO has authority to direct all activities

associated with the event and all decisions should be vetted through the IMT process.

- When establishing the IMT, provide for the inclusion of all relevant FDOH entities. In addition, consider requesting a representative from the Division of Emergency Management (DEM) and the local and federal planners to participate as part of the team. The following list is not all-inclusive, but these positions should be considered:
 - Emergency Coordination Officer (ECO)
 - Plans Chief – The established project manager should serve in this role.
 - Logistics Chief
 - Situation Unit
 - Information Management Unit
 - Advanced Planning
 - Technical Specialists
 - Epidemiology
 - Environmental Health
 - Radiation Control
 - BioWatch
 - Laboratories
 - Fusion Center Liaisons
 - Food Safety
 - Hospitals
 - Emergency Medical Services/Ambulances
- At the onset of the planning process, establish a People's First charge object code to track hours spent working on event activities. Contact Human Resources to do so and ensure the established code is sent to state and local human resource offices, business managers and the personnel assigned to the event.
- In coordination with the ECO, establish the operational period and set a meeting schedule around that period. The standard Incident Action Plan (IAP) meeting agenda (See ESF8 SOP) can be used. Set the meeting length based on the operations period. If the operations period is one week, thirty minutes should be sufficient. If the operations period is one month, consider scheduling an hour. Meetings should be used to keep team members informed and engaged and to review the tasks for the upcoming operations period. Meetings should be productive and stay on target.
- A standard location (shared drive or secured website) should be established to store documents and ensure all team members have access.
- Consider developing a guidelines document for the IMT members that provides the following information (See Reference Document B: RNC Incident Management Team Guidelines for an example):
 - IMT organizational structure and contact list
 - Communications methods and document storage locations
 - Information security requirements

- Operational periods and meeting frequency and schedule
 - Requirements for tracking hours
 - Additional expectations or requirements
- IAPs and situation updates should be provided prior to the meeting to allow team members to review the materials prior to the meetings. Documentation should be kept to record progress made on the IAP objectives and tasks. **See Reference Document C: RNC Incident Action Plans and Reference Document W: RNC Situation Overviews for examples.**

C. Intelligence and Information Sharing

In planning for NSSE's, restrictive information security requirements are provided to members of the subcommittees. It is up to each chair/co-chair of the subcommittee to determine the extent of sharing information. Documents are not to be shared with any agency or person who does not have a need to know. Some subcommittees do not share their information beyond the Executive Steering Committee. There may be limited information available to support detailed planning.

The committee structure creates a system of silos and prevents effective information sharing, incident coordination and communication. The impact of failing to utilize established emergency management system could have severe adverse effects to the ability to respond effectively as the incident shifts from this mode to consequence management.

An electronic disclaimer will be provided by the United State Secret Service, which will need to be added to all electronic communications related to the NSSE. The disclaimer exempts the communications from public records disclosure. Other than the disclaimer, security requirements will more than likely be provided only verbally, and not in writing, which leads to confusion and misunderstanding about what information can be shared and what cannot.

- Ensure all team members are aware of information security requirements related to the event and are provided with any disclaimer or documentation that is provided by the United States Secret Service (USSS). If the information security requirements are not provided in writing, request clarification about what information is considered sensitive and what information can be widely shared.
- Establish a secure means for conducting conference calls. The conference lines provided by the Department of Management Services have only one pass code for all callers. There is currently no means to exclude unidentified callers.
- Be proactive in providing information to and requesting information from the Division of Emergency Management regarding ongoing state-wide activities related to the event.
- Keep FDOH senior leaders informed of the current situation and the activities of the IMT. Regular briefings should be scheduled with the

State Surgeon General or designee and senior leaders from divisions and bureaus participating in the planning activities. Use the Standard ESF8 Leadership Briefing template (See ESF8 SOP) and keep it limited to one page. IAPs and situation documents can be provided as attachments. These briefings will allow leadership an opportunity to stay informed and ask questions. Consider inviting local planners to attend the briefings as well to directly address questions regarding local activities and operations.

- Florida Fusion Center Health Liaison Officers (ILOs) can be a resource for obtaining and sharing information. ILOs attend weekly meetings at the Fusion Center. If there is not an ILO on the IMT, be sure to keep them informed of the IMT activities and request that they bring back to the IMT any event information disseminated at the Fusion Center.

D. Logistics Support

Resource support is one of the primary ways the FDOH can assist local planners with special events planning. This support includes the acquisition, mobilization, delivery, monitoring and recovery of resources. Resources may be “hard” (supplies, equipment, tangibles, etc.) or people/manpower.

Based on the event, and the threat assessment, local planners will review an inventory of local and regional assets and develop a gap analysis. This gap analysis should be used to craft requests for state and federal resources. The state planner and staff from the Bureau of Preparedness and Response (EPR) Logistics Unit should meet with local planners to discuss their gap analysis and gain an understanding of local resource needs. EPR Logistics staff can provide a summary of FDOH resources available and answer questions about the potential use of the resources.

- **Determine the costs required to support local resource requests and develop a forecasted budget.**
 - Include mobilization and transportation costs (have logistics staff obtain quotes/estimates).
 - If resources are expendable, budget for replacement.
 - Include travel costs for both pre-planning (attending local meetings, trainings, exercises, etc.) and event support (logistics staff delivering resources, state liaisons working the event with local ESF8, local mutual aid support from surrounding counties or other parts of the state.)
 - Make hotel reservations early for staff supporting the event. The Host Committee typically places a block on rooms in the area and hotels charge higher fees during the time of the special event. Chances of obtaining rooms and a state government rate are greater if reservations are made far in advance. If the hotel has a liberal cancellation policy, book more rooms than are needed just in case additional staff are required to travel.
 - Include contingency funding if standby or additional resources are needed that were not originally planned for.
 - Consider overtime for staff required to work during the event. Staff may be required to work 12 hour shifts.

- **Identify potential funding sources.**
 - In most cases, no additional funding will be provided for public health and medical support related to the special event.
 - Consider using existing preparedness funds from the Centers for Disease Control and Prevention (CDC) or Assistant Secretary for Preparedness and Response (ASPR). Funding requests can be made through annual grant application or potentially through a carry-forward or re-direct.
 - In the past, the Federal Emergency Management Agency (FEMA) has offered a competitive grant opportunity for states hosting NSSEs. Research this option.
 - The host city typically receives a federal appropriation to support NSSEs. This funding is primarily used to support safety and security. Although it is unlikely, local planners should check with the host city to see if any of the funding will be made available to them.

- **Obtain approval for local resource requests.** Once you have determined the local resource requests, developed a budget for the expenses associated with the requests, and identified funding sources, present the requests to the ECO for approval. Be sure to have a justification for all requests being submitted.

- **Potential Staffing Resources**
 - **Regional or State mutual aid support**
 - Local ESF8 support – During NSSEs, multiple operations centers will be activated and will be operating extended hours. ESF8 support may be required in several locations and the local ESF8 may not have enough staff to fill all the shifts. Local planners may ask for support from surrounding counties. Determine if the local planner will recruit these individuals or if a state staffing request will be needed.
 - Regional Emergency Response Advisors (RERAs) – Local planners may request additional RERAs be deployed for field support. Approval will be required from the ECO and the Co-chair from the region the RERA is assigned to.
 - Liaison support – Communication is a challenge during NSSEs. Local planners may request a state liaison team deploy and staff the various operations centers. This provides better situational awareness. State liaisons can report back to State ESF8 and this minimizes the requests for information coming from State ESF8 to Local ESF8. It also offers direct and immediate access to State ESF8 for Local ESF8.

 - **Public Health and Medical Teams**
 - Local planners may consider the use of the following teams:
 - State Medical Response Teams
 - Environmental Health Strike Teams
 - Epidemiology Strike Teams
 - Behavioral Health Strike Teams
 - Florida Emergency Mortuary Operations Response System (FEMORS)
 - Work with the assigned Logistics Chief to determine when the use of these teams is permitted and what costs are associated with

their activation. Consider placing the teams on standby status rather than deploying.

- Identify and staff teams to be placed on standby status. Keep in mind; teams are not typically activated from within the event area. Choosing teams closest to the event area will cut down on costs and also the amount of time it will take the team to respond.
- Determine what wrap-around costs are associated with the deployment of the teams.
- Keep team leaders informed. Include them in the situation briefings.

- **Requests to pre-position “Hard” Resources.** Depending on the event and the availability of funding, local planners may request to have resources pre-positioned. This may include various supplies and equipment to fill local gaps. If the following resources are pre-positioned, additional planning will be required.
 - **Chempacks** – Chempack containers can be temporarily moved in from outside the event area. Reference the Temporary Movement of Chempack Assets Standard Operating Guidelines and [Document Reference O: RNC Chempack Container Movement Plan](#) for additional information.
 - Determine which type and how many containers are needed (EMS or Hospital).
 - Locate an existing custodian that is willing to “loan” the container(s).
 - Determine if the containers will be placed in a fixed facility or remain mobile (on the truck with drivers present).
 - Complete the Temporary Container Movement Request and submit to the CDC for approval.
 - **Portable Ventilators** – FDOH maintained ventilators are stored in various locations throughout the state. [See Reference Document N: RNC Ventilator Deployment Guidelines](#) for additional information.
 - The ventilators must remain stored in sealed shipping containers. Each shipping container will have a numbered seal on its locking container handle.
 - Ventilators can be deployed for less than 2 weeks and must remain in the cages to avoid having to be serviced when returned.
 - Ventilators are packed into cages containing 20 each packed in pelican cases. Dimensions are 2Wx4Lx5H. Cages are on wheels with no brakes.
 - Local planners must determine the ventilator storage locations and provide the state with the delivery addresses, contact information and dates of delivery and pick up.
 - Depending on the number of ventilators requested, delivery may be by vendor shipment, EPR Logistics or a combination of both.
 - **Medical Countermeasures** – Pre-positioning of radiological and biological countermeasures (antibiotics) may be requested by local planners. Planners may also request that the medications be on standby for a short notice movement. Logistics staff will need to work

closely with the Bureau of Public Health Pharmacies (EHPH) to coordinate these requests. The current radiological caches (RadPacks) do not contain sufficient amounts of DTPA or Prussian Blue. Intelligence from law enforcement on threat levels is essential for this area.

- If planners request pre-positioning of the caches, the CHD pharmacist will need to be involved as well, as they will have to assume temporary custody of the medications.
- If planners request that the medications are on standby for short notice delivery, provisions will be needed for obtaining immediate access to transportation and drivers. For the 2012 RNC, trucks were rented and staged to assure immediate access to transportation.

- **Deployment and Recovery Plans** - Work with Logistics staff to develop deployment and recovery plans/schedules and review this information to local planners.

E. Contingency Planning Support

Advanced planning should be conducted to identify contingency planning considerations to address the needs of the attendees and citizens. An incident hazard vulnerability analysis should be conducted for all special events. Contingencies should be developed for high probability threats.

Technical specialists from the various disciplines may be requested to assist local planners on workgroups or committees to develop incident specific planning.

Consider the following and ensure technical specialists are available to assist local planners if needed:

- **Patient Movement**

Local planners are responsible for developing tactical event plans, but may request assistance from the state in planning for patient movement. Determine if the existing state and local plans pertaining to patient movement will be sufficient to address the transportation of patients from the impacted area to other parts of the state if an incident occurs that overwhelms the local health and medical system. Keep in mind that throughput from the facilities in the Emergency Rooms is of paramount concern. Most of the injuries that have occurred in NSSE events would be classified “green”.

Enlist the assistance of the Medical Surge Unit. Local jurisdictions are responsible for patient movement within their counties and sometimes even into their surrounding region. The State must be prepared to assist in moving patients outside of the region to other parts of the state. Planning must be conducted to include the following functions: patient coordination, patient transportation, patient receiving, patient tracking and patient repatriation.

- Review existing local, state and federal plans.
 - Begin with the local Mass Casualty Incident Plan. Work with the local planner to understand local patient movement operations.

- Review the FDOH Community Stabilization and Patient Movement Plan and Florida Ambulance Deployment Standard Operating Procedure.
 - Review the Department of Health and Human Services Medical Movement of Evacuees ESF8 Patient Movement Concept of Operations.
 - **See Reference Documents F: RNC Patient Movement Plan and Related Appendices.**
 - Coordinate (through the Medical Surge Unit) with hospitals state-wide (outside of the event area) to provide situational awareness and determine which facilities would be willing to receive patients.
 - Coordinate (through the Logistics Manager) with the Florida Fire Chiefs Association and Florida Aero Medical Association to provide situational awareness and pre-identify transportation resources.
 - Coordinate with the Communications and Patient Tracking System Manager to establish plans for patient tracking. Plans must be consistent or compatible with local patient tracking plans.
 - Coordinate with regions outside the event area to review plans for patient reception sites.
 - Consider establishing and staffing a Medical Monitoring Unit to conduct an analysis of emergency room capabilities and capacities and support potential mass casualty and patient evacuation missions.
- **Surveillance and Investigations**
 Upon local request, enlist the assistance of an Epidemiology technical specialist to support local planning for and implementation of increased epidemiological surveillance and investigation during the special event. This person may be requested to serve on the local workgroup/committee.
 - Requests may be made to coordinate with hospitals to establish a more frequent reporting schedule for the Early Notification of Community-based Epidemics (ESSENCE-FL).
 - During the 2012 RNC, a pilot project was successfully implemented to transfer electronic medical record (EMR) data from Disaster Medical Assistance Teams (DMATs) into ESSENCE. If DMATs are deployed for the event, the epidemiology technical specialist should coordinate with ASPR to ensure this data transfer occurs.
- **Laboratory Surge and BioWatch**
 Upon local request, enlist the assistance of one of the Public Health Laboratory Directors and the Statewide BioWatch coordinator.
 - Laboratories should be prepared to support all biological outbreaks (natural and intentional), norovirus, influenza, food and water contamination resulting in human illness, chemical threats and suspicious substance testing. **See Reference Document P: Bureau of Public Health Laboratories, Tampa RNC Operations Plan.**
 - Determine if additional staffing or supplies will be needed to support the laboratory surge. If so, include in the budget for support.
 - If the NSSE host city is an existing BioWatch jurisdiction, the program should expect additional filters to be placed in the event area resulting in additional testing. If the host city is not an existing BioWatch

jurisdiction, filters may be brought into the event area temporarily. BioWatch “playbooks” are created by the BioWatch Advisory Committee for NSSEs and contain the location of the filters, collection schedules and procedures for reporting results. Contact the Statewide BioWatch Coordinator for additional information.

- **Food Safety and Defense**

Food Safety falls under the Health and Medical Subcommittee. The local planners can request federal Food and Drug Administration (FDA) or State resources for assistance. In Florida, the Department of Business and Professional Regulation has jurisdiction, however, local health planners must make the request to involve them. They may request FDOH representation if deemed warranted.

- **Severe Weather / Hurricane**

The local host jurisdiction will develop consequence management plans that will include severe weather. However, the State should have a contingency plan based on the specific event. Depending on the time of year and the location of the event, severe weather threats may be a threat. Use existing plans and determine what additional vulnerabilities and threats are anticipated related to the special event. [See Reference Document D: RNC Hurricane Contingency Planning Considerations and Reference Document E: RNC Hurricane Contingency Staffing Plan.](#)

- **Radiological Monitoring**

The Bureau of Radiation Control (ERC) may be requested to assist with radiation monitoring during the event. Planning for this will more than likely be conducted through the Fire, Life Safety and HAZMAT Subcommittee. Be sure the Health and Medical Sub-committee is aware of their efforts. Radiological monitoring is separate from local population monitoring and medication distribution center planning.

F. Public Information and Risk Communications Support

All NSSEs will attract a significant amount of media coverage. And in many cases, more information is available through the media than through the planning committees. Enlist the support of an Information Management Unit (IMU) through the Office of Communications.

- The IMU can use media monitoring as a means to identify potential public health and medical threats. They will monitor media releases, news reports and social media to obtain pertinent information and compile a media monitoring report.
- The IMU can also support local public information needs by developing and disseminating various public health messaging materials.
- For NSSEs, the IMU will develop a formal, strategic health communications plan in support of NSSE-type events to dovetail with any federal plans. See the Crisis and Emergency Risk Communications Annex for additional information.

G. Event Operations

The level of state support provided during the event will be dependant on the needs of the local jurisdiction. More than likely, State ESF8 will activate an Incident Management Team and will also have some level of field support. Consider the following:

- When feasible and appropriate, maintain consistency by having staff assigned in roles for planning continue to serve in those roles during the operations phase.
- Develop staffing schedules for both the State Emergency Operations Center (SEOC), if activated, and the FDOH offices.
- Develop Communications Plans and Reporting/Briefing Schedules prior to the event.
- Provide pre-event training for all assigned staff.
- Conduct situational briefings for all primary and standby staff prior to the event.
- Budget to cover overtime pay or split shifts in such a way that working overtime is not necessary. Be clear with staff, prior to the event, about how they will be compensated for overtime hours.
- Upon local request, deploy appropriate liaisons to all locations where public health and medical operations are being managed.
 - Establish a reporting mechanism for the liaisons to communicate with each other and back to local ESF8.
 - Local ESF8 should establish communications procedures (reporting requirements and timeframes) for all state and federal ESF8 staff supporting the event.
 - Utilize the generally accepted reporting schedule when feasible. (0600 and 1800). Reporting times should be scheduled immediately after the release of the established Situation Report times for the Incident Command and prior to the scheduled State Emergency Response Team briefings if possible. This would allow for the most current and accurate reporting of information.
 - Ensure deployed staff have adequate communications equipment (cell phone, air card, satellite phone, etc.).
 - Ensure deployed staff have been provided with all necessary resources. Conduct a pre-deployment briefing to discuss travel logistics, work assignments, reporting requirements and safety.

H. Post Event Actions

A tremendous amount of time, effort and expense is involved in planning for and responding to a special event. Documenting planning efforts and capturing lessons learned and best practices is critical.

- Keep good notes throughout the planning process and during the event itself. When you receive feedback from others, be sure to document it in your notes.

- Conduct a post-incident hotwash with participants as close as possible to the end of the event. Document all participant feedback. Send out a participant survey to collect additional data.
- Develop a Homeland Security Exercise and Evaluation Program (HSEEP) compliant after-action report and improvement plan.
- Create an organized event archive with all related documents and information.
- Update this document with additional considerations and suggestions.